



APPLICATION FOR EMERGENCY NON-IMMIGRANT VISA INTERVIEW

The Consulate General of The United States of America
4 Le Duan St., District 1, Ho Chi Minh City - Tel: 8229433; Fax: 8257338 (NIV Unit)

Date: _____

Name of Applicant: _____ ☐ Female ☐ Male
Surname *Given Name*

Date and Place of Birth: _____/_____/_____ in _____
Date *Month* *Year* *Province/City, Country*

Nationality: _____ Passport #: _____

Address 1: _____
(Home / Residence)

Address 2: _____
(Company/Organization)

Contact Telephone: _____ Return Fax Number: _____

PURPOSE OF TRAVEL:

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REASON FOR EMERGENCY REQUEST:

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Date of Interview Appointment: _____
(Scheduled by Citi Bank)

Date of Proposed Travel: _____

Date(s) of Any Previous Visa Applications: _____

Signature of Applicant

Note: Please send this form to fax number 8257338